0/				
NO. OF COPIES HECE	CIVED			
DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
	G A S	L	<u>L_</u>	
OPERATOR				
PRORATION OF				
Operator				
Flag-Redfern Oil Com				
Address				
P. O. Box	23.	Mid.	land	

Production Manager

August 28,

(Title)

1974 (Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

	FILE		AND	Tuective 1-1-03		
Ī	U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL O	SAS		
Ī	LAND OFFICE					
	CRANCEOUTED OIL					
İ	TRANSPORTER GAS					
ı	OPERATOR	i e				
.	PRORATION OFFICE					
1.	Operator					
- 1	•					
	Flag-Redfern Oil Comp	any				
l		- 70701				
	P. O. Box 23, Midland		101 491	CLACK BATTOM NAME TOO		
	Reason(s) for filing (Check proper box)			GAS MUST NOT BE		
- 1	New Well	Change in Transporter of:	FLA CO AFAS			
	Secompletion	Oil Dry Gas	UNIDES AN E	XCEPTION TO B-4070		
	Change in Ownership	Casinghead Gas Condens	IS OBTAINED.			
		THE WELL HAS DEEN DI	ACED IN THE POOL			
	If change of ownership give name	THIS WELL HAS BEEN PL DESIGNATED BELOW, IF Y	OU DO NOT CONCUR			
	and address of previous owner	NOTIFY THIS OFFICE.	TOO DO HOT VOILE			
1.	DECORIDETON OF WELL AND I	LICACIE				
24.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation 0 1916 Kind of Leas	e Lease No.		
				il cr Fee Fed. LC-065151		
	Bilbrey "23"	4 West Sawyer S	oan Andres	red. Ho oosisi		
	Location					
	Unit Letter I ; 198	Feet From The South Line	e and 660 Feet From	The <u>East</u>		
			,			
	Line of Section 23 Tow	mship 9-S Range	37-E , NMPM,	Lea County		
111	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S			
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	ved copy of this form is to be sent)		
	The Permian Corporati		P. O. Box 3119, Midland	1 Tays 79701		
	Name of Authorized Transporter of Cas	singhead GasX or Dry Gas	Address (Give address to which appro	ved copy of this form is to be sent)		
		,				
	None	To the last	Is gas actually connected? Wh	en .		
	li well produces oil or liquids,	Unit Sec. Twp. P.ge.	is gas deteatly connected?			
	give location of tanks.	L 23 9S 37E	No			
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number:			
	COMPLETION DATA					
••.		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completion	on - (X)	X	!!!!		
	Dut Coulded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded	i	1	5052'		
	7-25-74	8-15-75	5060'	Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			
	3980' KB	San Andres	5016'	5048		
	Perforations			Depth Casing Shoe		
	1 jet shot at: 5016,	18, 19, 20, 22, 27, 29,	, 30, 32'	5052'		
			CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	12-1/4"	28	370'	250 sx C1 "C", 2% CaC1		
		-	5060'	250 sx C1 "C" Poz, 2% ge		
	7-7/8"	9.5		0.75% CFR-2, 8 lbs salt/		
		 				
		<u> </u>				
ν.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load of	and must be equal to or exceed top allow=		
	OIL WELL	dote for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas l	ift etc.)		
	Date First New Oil Run To Tanks	Date of Test	_	-/		
	8-15-75	8-23-74	Pump			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	24 hrs	_	-	-		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF		
	Studi Frod Dailing 1001	47	8	81		
		1 4/				
	GAS WELL		Table Condensate AAACC	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Ordered or contratingra		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
		CE	ALL CONSERV	ATION COMMISSION		
VI. CERTIFICATE OF COMPLIANCE				0 1074		
			APPROVED /	P 3 1974 19		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				10/		
			BY THE TOTAL			
				CUDERVISOR DISTRICT I		
			TITLE SUPERVI			
		·				
		(4/ -1/	This form is to be filed in	compliance with RULE 1104.		
	Turon	A Greaves/	If this is a request for allowable for a newly drilled or despened well, this form must be accompanied by a tabulation of the deviation			
	(Sign	rature)	Well, this form must be second	ordence with Bill E 111.		

All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

Deviation surveys taken on Flag-Redfern Oil Company's Bilbrey "23" #4, Section 23, T-9-S, R-37-E, Lea County, New Mexico.

Depth	Deg	ree
370		1/2
844		3/4
1344		3/4
1840	1	
2288	1	1/4
2765	1	
3308	1	1/4
3839	·l	
3929	. 1	
4160	1	
4352		1/4
4614	1	1/4
4818		3/4
5060		3/4

I hereby certify that I have personal knowledge of the data and facts placed on this sheet, and that such information given above is true and complete.

Before me, the undersigned authority, on this day personally appeared Sherman H. Norton, Jr., known to me to be the person whose name is subscribed hereto, who, after being duly sworn, on oath states that he is the drilling contractor of the well identified in this instrument and that such well was not intentionally deviated from the vertical whatsoever.

Sworn and Subscribed to before me this the 5 day of August, 1974.

Notary Public

County, Texas.